

Fill in this information to identify your case:

United States Bankruptcy Court for the:
NORTHERN DISTRICT OF GEORGIA

Case number (if known): _____ Chapter you are filing under:

☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

17-55541

FILED IN CLERK'S OFFICE
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT
OF GEORGIA

2017 MAR 27 PM 2:31

M. REGINA THOMAS
CLERK

BY _____ ☐ Check if this is an
DEPUTY CLERK pending filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Justin First Name Everett Middle Name Echols Last Name Suffix (Sr., Jr., II, III)	Jasmine First Name Pauline Middle Name Echols Last Name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	 First Name Middle Name Last Name	Jasmine First Name Pauline Middle Name Moore Last Name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>5</u> <u>6</u> <u>7</u> <u>5</u> OR 9xx - xx - _____	xxx - xx - <u>5</u> <u>7</u> <u>6</u> <u>6</u> OR 9xx - xx - _____

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years
- Include trade names and doing business as names

☒ I have not used any business names or EINs.

☒ I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

If Debtor 2 lives at a different address:

3241 Quincey Crossing

Number Street

Number Street

Conyers

GA

30013

City

State

ZIP Code

City

State

ZIP Code

Rockdale

County

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

Number Street

P.O. Box

P.O. Box

City

State

ZIP Code

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

8. How you will pay the fee ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☒ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).
- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
9. Have you filed for bankruptcy within the last 8 years? ☐ No
- ☒ Yes.
- District Northern District of Georgia When 02/23/2012 Case number 12-54750-wih
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? ☒ No
- ☐ Yes.
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
11. Do you rent your residence? ☐ No. Go to line 12.
- ☒ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
- ☒ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?
- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Name of business, if any

Number Street

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

City

State

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:
You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):
You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
-
17. Are you filing under Chapter 7?
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?
- ☐ No. I am not filing under Chapter 7. Go to line 18.
☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No
☐ Yes
18. How many creditors do you estimate that you owe?
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
19. How much do you estimate your assets to be worth?
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
20. How much do you estimate your liabilities to be?
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input checked="" type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1541, 1519, and 3571.

X


Justin Everett Echols, Debtor 1

Executed on 03/26/2017
MM / DD / YYYY

X


Jasmine Pauline Echols, Debtor 2

Executed on 03/26/2017
MM / DD / YYYY

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

**For you if you are filing this
bankruptcy without an
attorney**

**If you are represented by an
attorney, you do not need to
file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

☐ No
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

☐ No
☒ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

☐ No
☒ Yes. Name of Person Charles M. Langevin, Jr.

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X

Justin Everett Echols, Debtor 1

Date 03/26/2017
MM / DD / YYYY

Contact phone _____

Cell phone (770) 688-5656

Email address justin.eechols@yahoo.com

X

Jasmine Pauline Echols, Debtor 2

Date 03/26/2017
MM / DD / YYYY

Contact phone _____

Cell phone _____

Email address misilverson2003@yahoo.co

Fill in this information to identify your case:			
Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>1216 Loch Haven Dr.</u>	From <u>01/2014</u>		From _____
Number Street	To <u>01/2016</u>	Number Street	To _____
_____		_____	
<u>Conyers</u>	<u>GA</u> <u>30013</u>		
City State ZIP Code		City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtor's* (Official Form 106H).

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$8,290.59</u> <input type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$3,374.10</u> <input type="checkbox"/> Operating a business
For the last calendar year: (January 1 to December 31, <u>2016</u>) YYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$33,874.00</u> <input type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$28,925.24</u> <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2015</u>) YYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$32,302.00</u> <input type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <u>\$38,919.00</u> <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Sources of income Describe below.
	Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<u>Food Stamps</u> <u>\$1,533.00</u> _____ _____	_____ _____ _____
For the last calendar year: (January 1 to December 31, <u>2016</u>) YYY	<u>Food Stamps</u> <u>\$1,533.00</u> _____ _____	_____ _____ _____
For the calendar year before that: (January 1 to December 31, <u>2015</u>) YYY	_____ _____ _____	_____ _____ _____

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No

- ☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No

- ☐ Yes. List all payments that benefited an insider.

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.
- ☒ No
☐ Yes. Fill in the details.
10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.
- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.
11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?
- ☒ No
☐ Yes. Fill in the details.
12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?
- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?
- ☒ No
☐ Yes. Fill in the details for each gift.
14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?
- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?
- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Charles M. Langevin, Jr. Person Who Was Paid 511 Trousseau Ln. Number Street	Payment for Bankruptcy Petition Preparation	03/26/2017	\$249.00
McDonough City	GA State	30252 ZIP Code	
249bankruptcy@gmail.com Email or website address			

Person Who Made the Payment, if Not You

Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Dollar Learning Foundation Person Who Made the Payment, if Not You 21900 Burbank Blvd Number Street	Payment for Credit Counseling Briefing	03/29/2017	\$14.99
Woodland Hills City	CA State	91367 ZIP Code	
www.bothcourses.com Email or website address			

Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
☒ Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Bank of America Name of Financial Institution PO Box 25118 Number Street Tampa FL 33633 City State ZIP Code	XXXX- 9 3 7 8	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	12/29/2016	(\$149.59)
Bank of America Name of Financial Institution PO Box 25118 Number Street Tampa FL 33633 City State ZIP Code	XXXX- 7 1 4 9	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	01/2017	(\$12.36)
BB&T Name of Financial Institution PO Box 632 Number Street Whiteville NC 28472 City State ZIP Code	XXXX- 7 0 1 2	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	03/15/2017	(\$46.28)

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known)

		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Suntrust Bank					
Name of Financial Institution					
303 Peachtree St.		XXXX- <u>3</u> <u>3</u> <u>9</u> <u>3</u>	<input checked="" type="checkbox"/> Checking	<u>01/25/2016</u>	<u>(\$596.63)</u>
Number Street			<input type="checkbox"/> Savings		
			<input type="checkbox"/> Money market		
			<input type="checkbox"/> Brokerage		
			<input type="checkbox"/> Other		
Atlanta	GA	30308			
City	State	ZIP Code			

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
☐ Yes. Fill in the details below.

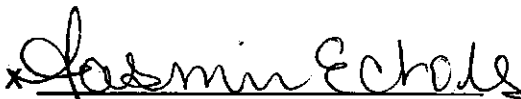
Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1541, 1519, and 3571.

X

Justin Everett Echols, Debtor 1

Date 03/26/2017



Jasmine Pauline Echols, Debtor 2

Date 03/26/2017

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☐ No
☒ Yes. Name of person Charles M. Langevin, Jr.

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case and this filing:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
☐ Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ \$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1.	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make: <u>Chevrolet</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Model: <u>Cruze</u>	<input checked="" type="checkbox"/> Debtor 2 only		
Year: <u>2014</u>	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
Approximate mileage: <u>52,000</u>	<input type="checkbox"/> At least one of the debtors and another	<u>\$10,175.00</u>	<u>\$10,175.00</u>
Other information: 2014 Chevrolet Cruze (approx. 52000 miles)	<input type="checkbox"/> Check if this is community property (see instructions)		
3.2.	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Make: <u>Dodge</u>	<input checked="" type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Model: <u>Avenger</u>	<input type="checkbox"/> Debtor 2 only		
Year: <u>2013</u>	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<u>\$13,075.00</u>	<u>\$13,075.00</u>
Approximate mileage: <u>60,000</u>	<input type="checkbox"/> At least one of the debtors and another		
Other information: 2013 Dodge Avenger (approx. 60000 miles)	<input type="checkbox"/> Check if this is community property (see instructions)		

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... ➔

\$23,250.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No
☒ Yes. Describe..... **Household goods**

\$2,000.00

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No
☒ Yes. Describe..... **Electronics**

\$3,000.00

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No
☐ Yes. Describe.....

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No
☐ Yes. Describe.....

10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No
☐ Yes. Describe.....

11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No
☒ Yes. Describe..... **Clothing**

\$1,000.00

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No
☒ Yes. Describe..... **Jewelry**

\$1,000.00

13. **Non-farm animals**

Examples: Dogs, cats, birds, horses

☒ No
☐ Yes. Describe.....

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No
☐ Yes. Give specific
information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....

\$7,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No
☐ Yes..... Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No
☒ Yes..... Institution name:

17.1. Checking account: Checking account with BB&T \$20.00

17.2. Checking account: Checking account with BB&T \$0.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No
☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No
☐ Yes. Give specific
information about
them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No
☐ Yes. Give specific
information about
them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No
☐ Yes. List each
account separately. Type of account: Institution name:

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes. _____ Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes. _____ Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes. _____ Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific
information about them _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific
information about them _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific
information about them _____

Money or property owed to you?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information
about them, including whether
you already filed the returns
and the tax years. _____

Federal: _____

State: _____

Local: _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value..... Company name: _____ Beneficiary: _____ Surrender or refund value: _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

- ☒ No
☐ Yes. Give specific information _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim..... _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim..... _____

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....



\$20.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe.. _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
☐ Yes. Describe.. _____

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe.. _____

41. Inventory

- ☒ No
☐ Yes. Describe.. _____

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe..... Name of entity: _____ % of ownership: _____

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe..... _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information. _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes.... _____

48. Crops--either growing or harvested

- ☒ No
☐ Yes. Give specific
information..... _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.... _____

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.... _____

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have
attached for Part 6. Write that number here..... →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... →

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... →

\$0.00

56. Part 2: Total vehicles, line 5

\$23,250.00

57. Part 3: Total personal and household items, line 15

\$7,000.00

58. Part 4: Total financial assets, line 36

\$20.00

59. Part 5: Total business-related property, line 45

\$0.00

60. Part 6: Total farm- and fishing-related property, line 52

\$0.00

61. Part 7: Total other property not listed, line 54

+ \$0.00

62. Total personal property. Add lines 56 through 61.....

\$30,270.00

Copy personal
property total →

+ \$30,270.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$30,270.00

Fill in this information to identify your case:

Debtor 1	Justin	Everett	Echols
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Jasmine	Pauline	Echols
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the Northern District of Georgia

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2014 Chevy Cruze</u> Line from <i>Schedule A/B</i> : <u>3</u>	\$ <u>10,175.00</u>	<input checked="" type="checkbox"/> \$ <u>5000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(3)</u>
Brief description: <u>2013 Dodge Avenue</u> Line from <i>Schedule A/B</i> : <u>3</u>	\$ <u>13,075.00</u>	<input checked="" type="checkbox"/> \$ <u>5000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(3)</u>
Brief description: <u>Household goods</u> Line from <i>Schedule A/B</i> : <u>6</u>	\$ <u>2,000.00</u>	<input checked="" type="checkbox"/> \$ <u>2000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(4)</u>

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1

Justin

Everett

Exhibits

Page 25 of 82

First Name

Middle Name

Last Name

Case number (if known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: <u>Electronics</u> Line from Schedule A/B: <u>7</u>	\$ <u>3,000.00</u>	<input checked="" type="checkbox"/> \$ <u>3000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(4)</u>
Brief description: <u>Clothing</u> Line from Schedule A/B: <u>11</u>	\$ <u>1,000.00</u>	<input checked="" type="checkbox"/> \$ <u>1000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(4)</u>
Brief description: <u>Jewelry</u> Line from Schedule A/B: <u>12</u>	\$ <u>1,000.00</u>	<input checked="" type="checkbox"/> \$ <u>1000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(5)</u>
Brief description: <u>Checking - BB&T</u> Line from Schedule A/B: <u>17</u>	\$ <u>20.00</u>	<input checked="" type="checkbox"/> \$ <u>20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(6)</u>
Brief description: <u>Savings - BB&T</u> Line from Schedule A/B: <u>17</u>	\$ <u>0.00</u>	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>44-13-100(6)</u>
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1	<u>Justin</u> First Name	<u>Everett</u> Middle Name	<u>Echols</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u> First Name	<u>Pauline</u> Middle Name	<u>Echols</u> Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
---	--	--

2.1	Describe the property that secures the claim:	\$13,000.00	\$13,075.00
Exeter Finance Creditor's name 222 Las Colinas Blvd W Ste 1800 Number Street	2013 Dodge Avenger (approx. 60000 miles)		

As of the date you file, the claim is: Check all that apply.

- | | |
|---|--|
| <p>Irving TX 75039
City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> | <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p> |
|---|--|

Date debt was incurred 10/27/2014 Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$13,000.00

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 1:

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

2.2

Describe the property that
secures the claim:

\$16,410.00

\$10,175.00

\$6,235.00

GM Financial

Creditor's name

PO Box 181145

Number Street

2014 Chevrolet Cruze
(approx. 52000 miles)

Arlington

TX 76096

City

State ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates
to a community debt

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Date debt was incurred 10/27/2014

Last 4 digits of account number

2 9 4 5

Add the dollar value of your entries in Column A on this page. Write
that number here:

\$16,410.00

If this is the last page of your form, add the dollar value totals from
all pages. Write that number here:

\$29,410.00

Fill in this information to identify your case:

Debtor 1	Justin First Name	Everett Middle Name	Echols Last Name
Debtor 2 (Spouse, if filing)	Jasmine First Name	Pauline Middle Name	Echols Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**

Case number
(if known) _____

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
\$41.00	\$41.00	\$0.00

2.1

Georgia Department of Revenue

Priority Creditor's Name

1800 Century Blvd NE, Suite 9100

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta

GA

30345

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

\$1,264.47

4.1

Badcock

Nonpriority Creditor's Name

P.O. Box 497

Number Street

Last 4 digits of account number 5 8 3 3

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Mulberry

FL 33860

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.2

Banfield Pet Hospital

Nonpriority Creditor's Name

18101 SE 6th Way

Number Street

Last 4 digits of account number _____

When was the debt incurred? 09/11/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Vancouver

WA 98683

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Veterinary Services

\$127.00

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total Claim

4.3

\$300.00

Bank of America

Nonpriority Creditor's Name

PO Box 25118

Number Street

Last 4 digits of account number 9 3 7 8

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Tampa FL 33633

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.4

\$300.00

Bank of America

Nonpriority Creditor's Name

PO Box 25118

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Tampa FL 33633

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.5

\$1,862.00

Barclay Bank

Nonpriority Creditor's Name

125 S. West St.

Number Street

Last 4 digits of account number

When was the debt incurred? 08/30/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington DE 19801

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.6

\$76.28

BB&T

Nonpriority Creditor's Name

PO Box 632

Number Street

Whiteville NC 28472

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **03/15/2017**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.7

\$348.90

Best Bank

Nonpriority Creditor's Name

PO Box 240200

Number Street

Milwaukee WI 53224

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 8 2 6**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.8

\$205.86

Bioreference Laboratories

Nonpriority Creditor's Name

PO Box 21134

Number Street

New York NY 10087

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **01/03/2017**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total Claim

4.9

\$1,196.11

Capital One

Nonpriority Creditor's Name

PO Box 30285

Number Street

Salt Lake City UT 84130

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 7 1 7

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.10

\$663.73

Capital One

Nonpriority Creditor's Name

PO Box 30285

Number Street

Salt Lake City UT 84130

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 2 7 5

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.11

\$309.68

Capital One

Nonpriority Creditor's Name

PO Box 30285

Number Street

Salt Lake City UT 84130

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 5 8 3

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.12

\$900.09

Capital One

Nonpriority Creditor's Name

PO Box 30285

Number Street

Salt Lake City UT 84130

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 8 3 5

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.13

\$297.98

Capital One

Nonpriority Creditor's Name

PO Box 30285

Number Street

Salt Lake City UT 84130

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 3 5 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.14

Unknown

Chase

Nonpriority Creditor's Name

PO Box 36520

Number Street

Louisville KY 40233

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.15

\$425.02

Children's Healthcare of Atlanta

Nonpriority Creditor's Name

PO Box 3475

Number Street

Toledo OH 43607

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 9 0 9

When was the debt incurred? 10/07/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.16

\$46.21

Comcast

Nonpriority Creditor's Name

1701 JFK Boulevard

Number Street

Philadelphia PA 19103

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Cable Services

4.17

\$534.05

Directv

Nonpriority Creditor's Name

P.O. Box 6550

Number Street

Englewood CO 80155

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Satellite Service

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.18

\$30.00

Emory Alliance Credit Union

Nonpriority Creditor's Name

1237 Clairmont Road

Number Street

Decatur GA 30030

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 0 4 5

When was the debt incurred? 02/16/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.19

\$75.00

Emory Healthcare

Nonpriority Creditor's Name

1364 Clifton Rd NE

Number Street

Atlanta GA 30322

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.20

\$749.65

First Financial Bank USA

Nonpriority Creditor's Name

363 W Anchor Dr,

Number Street

North Sioux City SD 57049

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 6 0 0

When was the debt incurred? 05/07/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Account

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.21

\$73.62

Georgia Power

Nonpriority Creditor's Name
241 Ralph McGill Blvd.
Number Street

Last 4 digits of account number _____

When was the debt incurred? **11/28/2012**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta **GA** **30308**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Utilities

4.22

Unknown

Money Tree

Nonpriority Creditor's Name
561 Forest Pkwy #6
Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Forest Park **GA** **30297**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Loan

4.23

\$1,288.00

Netnet

Nonpriority Creditor's Name
121 S. 13th St.
Number Street

Last 4 digits of account number _____

When was the debt incurred? **06/25/2010**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Lincoln **NE** **68508**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.24

\$3,364.00

Nelnet

Nonpriority Creditor's Name

121 S. 13th St.

Number Street

Last 4 digits of account number _____

When was the debt incurred? 09/2003

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Lincoln NE 68508

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.25

\$6,022.00

Nelnet

Nonpriority Creditor's Name

121 S. 13th St.

Number Street

Last 4 digits of account number _____

When was the debt incurred? 06/25/2010

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Lincoln NE 68508

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.26

\$3,364.00

Nelnet

Nonpriority Creditor's Name

121 S. 13th St.

Number Street

Last 4 digits of account number _____

When was the debt incurred? 09/25/2003

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Lincoln NE 68508

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.27

\$117.30

Northside Anesthesiology Consultants

Nonpriority Creditor's Name

1000 Johnson Ferry Rd. NE

Number Street

Atlanta GA 30342

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.28

\$509.44

Northside Hospital

Nonpriority Creditor's Name

1000 Johnson Ferry Rd.

Number Street

Atlanta GA 30342

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? **09/29/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.29

\$1,111.75

Northside Hospital

Nonpriority Creditor's Name

1000 Johnson Ferry Rd.

Number Street

Atlanta GA 30342

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1 6 0 5**

When was the debt incurred? **09/29/2016**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.30

\$15.88

Pathology & Laboratory Medicine, PC

Nonpriority Creditor's Name

3300 Buckeye Rd.

Number Street

Last 4 digits of account number 2 0 1 6

When was the debt incurred? 09/29/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta GA 30341

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.31

\$37.00

Peachtree Piedmont Pathology

Nonpriority Creditor's Name

1968 Peachtree Rd.

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta GA 30309

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.32

\$50.00

Pediatric Medical Group

Nonpriority Creditor's Name

1301 Concord Terrace

Number Street

Last 4 digits of account number 0 1 3 4

When was the debt incurred? 07/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Fort Lauderdale FL 33323

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.33

\$45.00

Pediatric Medical Group

Nonpriority Creditor's Name

1301 Concord Terrace

Number Street

Fort Lauderdale FL 33323

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 0 1 3 4

When was the debt incurred? 07/08/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.34

\$0.00

Piedmont Healthcare

Nonpriority Creditor's Name

PO Box 102859

Number Street

Atlanta GA 30368

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? 05/14/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.35

\$170.00

Progenity

Nonpriority Creditor's Name

PO Box 3951

Number Street

Sarasota FL 34230

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? 01/31/2017

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2 Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.36

\$776.00

Progressive Financial

Nonpriority Creditor's Name
1919 W Fairmont Dr #8
Number Street

Last 4 digits of account number 0 2 0 9

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Tempe AZ 85282

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Lease Deficiency

Is the claim subject to offset?

- ☒ No
☐ Yes

4.37

\$167.19

QVC

Nonpriority Creditor's Name
1200 Wilson Dr.
Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

West Chester PA 19380

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Account

Is the claim subject to offset?

- ☒ No
☐ Yes

4.38

\$264.00

Rockdale County ER Physicians

Nonpriority Creditor's Name
1412 Millstead Ave.
Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers GA 30012

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.39

\$450.00

Rockdale County ER Physicians

Nonpriority Creditor's Name

1412 Milstead Ave.

Number Street

Last 4 digits of account number _____

When was the debt incurred? **02/02/2011**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers **GA** **30012**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.40

\$450.00

Rockdale County ER Physicians

Nonpriority Creditor's Name

1412 Milstead Ave.

Number Street

Last 4 digits of account number _____

When was the debt incurred? **02/02/2011**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers **GA** **30012**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.41

\$1,000.00

Rockdale County Water

Nonpriority Creditor's Name

958 Milstead Ave

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers **GA** **30012**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Utilities

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.42

\$537.46

Rockdale Medical Center

Nonpriority Creditor's Name

1412 Milstead Ave.

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers

GA

30012

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

4.43

\$102.65

Scana

Nonpriority Creditor's Name

3344 Peachtree Rd NE #2150

Number Street

Last 4 digits of account number

When was the debt incurred? **10/2010**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Atlanta

GA

30326

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Utilities

4.44

\$280.00

Service Loan

Nonpriority Creditor's Name

2166 Salem Rd. SE #A

Number Street

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Conyers

GA

30013

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Loan

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.45

\$353.75

Six Flags

Nonpriority Creditor's Name

924 Avenue J

Number Street

Grand Prairie TX 75050

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 3 5 4

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Membership Cancellation

4.46

\$795.00

Snapping Shoals EMC

Nonpriority Creditor's Name

14750 Brown Bridge Rd.

Number Street

Covington GA 30016

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Utilities

4.47

\$27.00

Solstas Lab Partners

Nonpriority Creditor's Name

4380 Federal Dr.

Number Street

Suite 100

Greensboro NC 27410

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.48

\$626.63

Suntrust Bank

Nonpriority Creditor's Name

303 Peachtree St.

Number Street

Atlanta GA 30308

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 3 9 3

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.49

\$626.63

Suntrust Bank

Nonpriority Creditor's Name

303 Peachtree St.

Number Street

Atlanta GA 30308

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 3 9 3

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Overdrawn account

4.50

\$4,717.00

Terraces at Fieldstone Apartments

Nonpriority Creditor's Name

50 Loch Haven Dr. SE

Number Street

Conyers GA 30013

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? 12/03/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Lease Deficiency

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.51

\$3,090.30

US Department of Education

Nonpriority Creditor's Name

PO Box 105028

Number Street

Atlanta GA 30348

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7 9 5 6**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.52

\$1,000.00

Wells Fargo

Nonpriority Creditor's Name

420 Montgomery Street

Number Street

San Francisco CA 94104

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Overdrawn account

4.53

\$600.00

Wells Fargo

Nonpriority Creditor's Name

420 Montgomery Street

Number Street

San Francisco CA 94104

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Overdrawn account

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim:

4.54

\$1,416.00

Wilkinson REA

Nonpriority Creditor's Name
2100 Riveredge Pkwy
Number Street
Suite 825

Atlanta **GA** **30328**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **10/26/2012**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Lease Deficiency

4.55

\$3,271.71

Woodland Trace Apartments

Nonpriority Creditor's Name
1669 Iris Drive SE
Number Street

Conyers **GA** **30013**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Lease Deficiency

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Aargon Agency

Name
8668 Spring Mountain Rd.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.45 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Las Vegas **NV** **89117**
City State ZIP Code

Last 4 digits of account number _____

Allianceone

Name
1684 Woodlands Dr.
Number Street
Suite 150

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Maumee **OH** **43537**
City State ZIP Code

Last 4 digits of account number 2 3 3 3

Avante USA

Name
3600 S. Gessner Rd.
Number Street
Suite 225

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Houston **TX** **77063**
City State ZIP Code

Last 4 digits of account number _____

Boulder Credit Services

Name
PO Box 1259
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Troy **MI** **48099**
City State ZIP Code

Last 4 digits of account number _____

Business Revenue Systems

Name
PO Box 13077
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Des Moines **IA** **50310**
City State ZIP Code

Last 4 digits of account number _____

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

CBCS

Name
PO Box 2589
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.49 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Columbus **OH** **43216**
City State ZIP Code

Last 4 digits of account number 9 6 6 3

Contract Callers, Inc.

Name
501 Green St 3rd Floor
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.43 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Augusta **GA** **30901**
City State ZIP Code

Last 4 digits of account number _ _ _ _

Darnel Quick Recovery

Name
4134 US 278
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.46 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Covington **GA** **30014**
City State ZIP Code

Last 4 digits of account number _ _ _ _

Diversified Account Systems

Name
PO Box 870547
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.42 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Morrow **GA** **30287**
City State ZIP Code

Last 4 digits of account number M 1 8 4

Diversified Account Systems

Name
PO Box 870547
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Morrow **GA** **30287**
City State ZIP Code

Last 4 digits of account number M 1 8 4

Eastern Account Systems

Name
PO Box 1022
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Wixom **MI** **48393**
City State ZIP Code

Last 4 digits of account number _ _ _ _

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

EOS CCA

Name
700 Longwater Dr.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.37 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Norwell **MA** **02061**
City State ZIP Code

First Financial Asset Management

Name
3091 Governors Lake Pkwy #500
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.48 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Norcross **GA** **30071**
City State ZIP Code

First National Collection Bureau

Name
610 Waltham Way
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Sparks **NV** **89434**
City State ZIP Code

Franklin Collection Service

Name
2978 W. Jackson St.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.54 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Tupelo **MS** **38801**
City State ZIP Code

Franklin Collection Service

Name
2978 W. Jackson St.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.47 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Tupelo **MS** **38801**
City State ZIP Code

Harris & Harris

Name
111 W. Jackson Blvd.
Number Street
Suite 400

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Chicago **IL** **60604**
City State ZIP Code

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Hunter Warfield

Name
4620 Woodland Corporate Blvd
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.50 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Tampa **FL** **33614**
City State ZIP Code

Last 4 digits of account number _____

IC Systems

Name
PO Box 64378
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Saint Paul **MN** **55164**
City State ZIP Code

Last 4 digits of account number _____

IC Systems

Name
PO Box 64378
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Saint Paul **MN** **55164**
City State ZIP Code

Last 4 digits of account number _____

National Credit Systems

Name
P.O. Box 312125
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.55 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Atlanta **GA** **31131**
City State ZIP Code

Last 4 digits of account number _____

North American Credit Services

Name
2810 Walker Rd.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.40 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Chattanooga **TN** **37421**
City State ZIP Code

Last 4 digits of account number _____

North American Credit Services

Name
2810 Walker Rd.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.39 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Chattanooga **TN** **37421**
City State ZIP Code

Last 4 digits of account number _____

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

North American Credit Services

Name
2810 Walker Rd.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.38 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Chattanooga **TN** **37421**
City State ZIP Code

Patient Accounts Bureau

Name
PO Box 279
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Norcross **GA** **30091**
City State ZIP Code

Patient Accounts Bureau

Name
PO Box 279
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Norcross **GA** **30091**
City State ZIP Code

Portfolio Recovery

Name
120 Corporate Blvd.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Pensacola **FL** **32502**
City State ZIP Code

SCA Collections

Name
PO Box 876
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.31 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Greenville **NC** **27835**
City State ZIP Code

Sherman Originators III, LLC

Name
PO Box 10497
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Greenville **SC** **29603**
City State ZIP Code

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Sherman Originators III, LLC

Name
PO Box 10497
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Greenville **SC** **29603**
City State ZIP Code

Last 4 digits of account number _ _ _ _

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$41.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$41.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$17,128.30</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$29,303.04</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$46,431.34</u>

Fill in this information to identify your case:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	<u></u>		

☐ Check if this is an
amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this information to identify your case:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number
(if known) _____

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
☐ No
☒ Yes
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☐ Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Lauren Moore

Name

3241 Quincey Crossing

Number Street

Conyers

City

GA

State

30013

ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line 4.50

☐ Schedule G, line _____

Terraces at Fieldstone Apartments

Fill in this information to identify your case:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF GEORGIA</u>		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☒ Employed
☐ Not employed

Pit Boss

Good Smoke, LLC

2831 Greystone Commercial Boulev
Number Street

Birmingham AL 35242
City State Zip Code

6 years

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Customer Service Specialist

Southwest Airlines

2702 Love Field Drive
Number Street

Dallas TX 75235
City State Zip Code

10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$1,413.20</u>	<u>\$1,467.00</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	<u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$1,413.20</u>	<u>\$1,467.00</u>

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known)

For Debtor 1 For Debtor 2 or
non-filing spouse

Copy line 4 here	→ 4.	<u>\$1,413.20</u>	<u>\$1,467.00</u>
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	<u>\$233.31</u>	<u>\$24.21</u>
5b. Mandatory contributions for retirement plans	5b.	<u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans	5c.	<u>\$0.00</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans	5d.	<u>\$0.00</u>	<u>\$0.00</u>
5e. Insurance	5e.	<u>\$0.00</u>	<u>\$276.61</u>
5f. Domestic support obligations	5f.	<u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues	5g.	<u>\$0.00</u>	<u>\$31.00</u>
5h. Other deductions. Specify: _____	5h.+	<u>\$0.00</u>	<u>\$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	<u>\$233.31</u>	<u>\$331.82</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	<u>\$1,179.89</u>	<u>\$1,135.18</u>
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	<u>\$0.00</u>	<u>\$0.00</u>
8b. Interest and dividends	8b.	<u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	<u>\$0.00</u>	<u>\$0.00</u>
8d. Unemployment compensation	8d.	<u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security	8e.	<u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	<u>\$0.00</u>	<u>\$0.00</u>
8g. Pension or retirement income	8g.	<u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: _____	8h.+	<u>\$0.00</u>	<u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	<u>\$0.00</u>	<u>\$0.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	<u>\$1,179.89</u> + <u>\$1,135.18</u>	<u>\$2,315.07</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			
			11. + <u>\$0.00</u>
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.			12. <u>\$2,315.07</u> Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.			
<input checked="" type="checkbox"/> Yes. Explain: <u>Jasmine has been on maternity leave. She is now going back to work. The food stamps are therefore ending at the end of the month.</u>			

Fill in this information to identify your case:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
☒ Yes. Does Debtor 2 live in a separate household?
☒ No
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

- ☐ No
☒ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
<u>Daughter</u>	<u>11</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<u>Son</u>	<u>6 months</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. _____

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues

4a. _____
4b. _____
4c. _____
4d. _____

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	_____
6b. Water, sewer, garbage collection	6b.	_____
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$175.00
6d. Other. Specify: _____	6d.	_____
7. Food and housekeeping supplies	7.	\$600.00
8. Childcare and children's education costs	8.	\$400.00
9. Clothing, laundry, and dry cleaning	9.	\$50.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11.	\$50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	_____
14. Charitable contributions and religious donations	14.	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	\$300.00
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 Chevy	17a.	\$376.00
17b. Car payments for Vehicle 2 Dodge	17b.	\$367.00
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a.	_____
20b. Real estate taxes	20b.	_____
20c. Property, homeowner's, or renter's insurance	20c.	_____
20d. Maintenance, repair, and upkeep expenses	20d.	_____
20e. Homeowner's association or condominium dues	20e.	_____

21. Other. Specify: _____ 21. + _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$2,668.00</div>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	_____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$2,668.00</div>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">\$2,315.07</div>
23b. Copy your monthly expenses from line 22c above.	23b.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">-\$2,668.00</div>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	<div style="border: 1px solid black; padding: 2px; display: inline-block;">(\$352.93)</div>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

None.

Fill in this information to identify your case:			
Debtor 1	Justin First Name	Everett Middle Name	Echols Last Name
Debtor 2 (Spouse, if filing)	Jasmine First Name	Pauline Middle Name	Echols Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☐ creditors have claims secured by your property, or
- ☐ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Exeter Finance	<input checked="" type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt:	2013 Dodge Avenger (approx. 60000 miles)	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
		<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name:	GM Financial	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt:	2014 Chevrolet Cruze (approx. 52000 miles)	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
		<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X

Justin Everett Echols, Debtor 1

X

Jasmine Pauline Echols, Debtor 2

Date 03/26/2017
MM/DD/YYYY

Date 03/26/2017
MM/DD/YYYY

Fill in this information to identify your case:			
Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B..... \$0.00

1b. Copy line 62, Total personal property, from Schedule A/B..... \$30,270.00

1c. Copy line 63, Total of all property on Schedule A/B..... \$30,270.00

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... \$29,410.00

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$41.00

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + \$46,431.34

Your total liabilities

\$75,882.34

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... \$2,315.07

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... \$2,668.00

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$5,562.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$41.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$17,128.30</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	<u>\$17,169.30</u>

Fill in this information to identify your case:			
Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☐ No

☒ Yes. Name of person Charles M. Langevin, Jr.

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

Justin Everett Echols, Debtor 1

Date 03/26/2017
MM / DD / YYYY

X

Jasmine Pauline Echols, Debtor 2

Date 03/26/2017
MM / DD / YYYY

Fill in this information to identify the case:

Debtor 1	<u>Justin</u>	<u>Everett</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Jasmine</u>	<u>Pauline</u>	<u>Echols</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>			
Case number (if known)	_____ Chapter <u>7</u>		_____

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 2. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1: Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- ☐ whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- ☐ whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- ☐ whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- ☐ whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- ☐ what tax consequences may arise because a case is filed under the Bankruptcy Code;
- ☐ whether any tax claims may be discharged;
- ☐ whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- ☐ how to characterize the nature of your interests in property or your debts; or
- ☐ what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer Charles M. Langevin, Jr. has notified me of
Name any maximum allowable fee before preparing any document for filing or accepting any fee.

X [Signature]
Justin Everett Echols, Debtor 1, acknowledging receipt of this notice

Date 03/26/2017
MM / DD / YYYY

X [Signature]
Jasmine Pauline Echols, Debtor 2, acknowledging receipt of this notice

Date 03/26/2017
MM / DD / YYYY

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Part 2: Declaration and Signature of the Bankruptcy Petition Preparer

Under penalty of perjury, I declare that:

- ☒ I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer;
- ☒ I or my firm prepared the documents listed below and gave the debtor a copy of them and the *Notice to Debtor by Bankruptcy Petition Preparer* as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and
- ☒ If rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor.

Charles M. Langevin, Jr.

Printed name

Title, if any

Firm name, if it applies

511 Trouseau Ln.

Number Street

McDonough

City

GA

State

30252

ZIP Code

(678) 490-5841

Contact phone

I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check:

(Check all that apply.)

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Voluntary Petition (Form 101) | <input checked="" type="checkbox"/> Schedule I (Form 106I) | <input type="checkbox"/> Chapter 11 Statement of Your Current Monthly Income (Form 122B) |
| <input checked="" type="checkbox"/> Statement About Your Social Security Numbers (Form 121) | <input checked="" type="checkbox"/> Schedule J (Form 106J) | <input type="checkbox"/> Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Form 122C-1) |
| <input checked="" type="checkbox"/> Summary of Your Assets and Liabilities and Certain Statistical Information (Form 106Sum) | <input checked="" type="checkbox"/> Declaration About an Individual Debtor's Schedules (Form 106Dec) | <input type="checkbox"/> Chapter 13 Calculation of Your Disposable Income (Form 122C-2) |
| <input checked="" type="checkbox"/> Schedule A/B (Form 106A/B) | <input checked="" type="checkbox"/> Statement of Financial Affairs (Form 107) | <input type="checkbox"/> Chapter 13 Calculation of Your Disposable Income (Form 122C-2) |
| <input checked="" type="checkbox"/> Schedule C (Form 106C) | <input checked="" type="checkbox"/> Statement of Intention for Individuals Filing Under Chapter 7 (Form 108) | <input checked="" type="checkbox"/> Application to Pay Filing Fee in Installments (Form 103A) |
| <input checked="" type="checkbox"/> Schedule D (Form 106D) | <input checked="" type="checkbox"/> Chapter 7 Statement of Your Current Monthly Income (Form 122A-1) | <input type="checkbox"/> Application to Have Chapter 7 Filing Fee Waived (Form 103B) |
| <input checked="" type="checkbox"/> Schedule E/F (Form 106E/F) | <input type="checkbox"/> Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) | <input checked="" type="checkbox"/> A list of names and addresses of all creditors (creditor or mailing matrix) |
| <input checked="" type="checkbox"/> Schedule G (Form 106G) | <input type="checkbox"/> Chapter 7 Means Test Calculation (Form 122A-2) | <input checked="" type="checkbox"/> Other <u>Pro-se affidavit</u> |
| <input checked="" type="checkbox"/> Schedule H (Form 106H) | | |

Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the documents to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110.

X

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner

3 7 1 - 9 2 - 3 0 7 0
Social Security number of person who signed

Date 03/26/2017
MM / DD / YYYY

Charles M. Langevin, Jr.

Printed name

X

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner

Social Security number of person who signed

Date _____
MM / DD / YYYY

Printed name

B2800 (Form 2800) (12/15)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

In re **Justin Everett Echols**
Jasmine Pauline Echols
Debtor

Case No. _____
Chapter 7

DISCLOSURE OF COMPENSATION OF BANKRUPTCY PETITION PREPARER

[Must be filed with the petition if a bankruptcy petition preparer prepares the petition. 11 U.S.C. § 110(h)(2).]

1. Under 11 U.S.C. § 110(h), I declare under penalty of perjury that I am not an attorney or employee of an attorney, that I prepared or caused to be prepared one or more documents for filing by the above-named debtor(s) in connection with this bankruptcy case, and that compensation paid to me within one year before the filing of the bankruptcy petition, or agreed to be paid to me, for services rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For document preparation services, I have agreed to accept.....	<u>\$249.00</u>
Prior to the filing of this statement I have received.....	<u>\$249.00</u>
Balance Due.....	<u>\$0.00</u>

2. I have prepared or caused to be prepared the following documents (itemize):

See Attached List on Official Form 119

and provided the following services (itemize):

Petition Preparation ONLY

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

4. The source of compensation to be paid to me is:

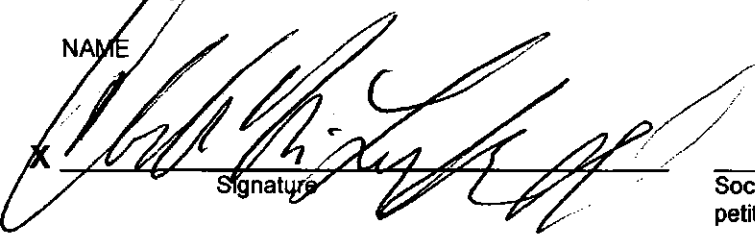
☒ Debtor ☐ Other (specify)

5. The foregoing is a complete statement of any agreement or arrangement for payment to me for preparation of the petition filed by the debtor(s) in this bankruptcy case.

6. To my knowledge no other person has prepared for compensation a document for filing in connection with this bankruptcy case except as listed below:

NAME

SOCIAL SECURITY NUMBER

X 
Signature

371-92-3070

Social Security number of bankruptcy
petition preparer*

03/26/2017

Date

Charles M. Langevin, Jr.
Printed name and title, if any, of
Bankruptcy Petition Preparer

511 Trousseau Ln.
McDonough, GA 30252
Address

* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Fill in this information to identify your case:				Check one box only as directed in this form and in Form 122A-1Supp:
Debtor 1	<u>Justin</u> <small>First Name</small>	<u>Everett</u> <small>Middle Name</small>	<u>Echols</u> <small>Last Name</small>	<input checked="" type="checkbox"/> 1. There is no presumption of abuse. <input type="checkbox"/> 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). <input type="checkbox"/> 3. The Means Test does not apply now because of qualified military service but it could apply later. <input type="checkbox"/> Check if this is an amended filing
Debtor 2 (Spouse, if filing)	<u>Jasmine</u> <small>First Name</small>	<u>Pauline</u> <small>Middle Name</small>	<u>Echols</u> <small>Last Name</small>	
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF GEORGIA</u>				
Case number (if known)	_____			

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. You and your spouse are:
- ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

- | | | |
|--|------------|------------|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | \$2,910.48 | \$1,119.08 |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | \$0.00 | \$0.00 |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | \$0.00 | \$0.00 |

Debtor 1 **Justin Everett Echols**
Debtor 2 **Jasmine Pauline Echols**

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

5. Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$0.00</u>		
Ordinary and necessary operating expenses	<u>— \$0.00</u>	<u>— \$0.00</u>		
Net monthly income from a business, profession, or farm	<u>\$0.00</u>	<u>\$0.00</u>	Copy here →	<u>\$0.00</u> <u>\$0.00</u>

6. Net income from rental and other real property

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$0.00</u>		
Ordinary and necessary operating expenses	<u>— \$0.00</u>	<u>— \$0.00</u>		
Net monthly income from rental or other real property	<u>\$0.00</u>	<u>\$0.00</u>	Copy here →	<u>\$0.00</u> <u>\$0.00</u>

7. Interest, dividends, and royalties

\$0.00 \$0.00

8. Unemployment compensation

\$0.00 \$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$0.00 \$0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Food Stamps \$511.00

Total amounts from separate pages, if any.

+ _____ + _____

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$2,910.48	+	\$1,630.08	=	\$4,540.56
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Total current monthly income

Debtor 1 Justin Everett Echols
Debtor 2 Jasmine Pauline Echols

Case number (if known) _____

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here → 12a. \$4,540.56
Multiply by 12 (the number of months in a year). X 12
12b. The result is your annual income for this part of the form. 12b. \$54,486.72

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Georgia

Fill in the number of people in your household.

4

Fill in the median family income for your state and size of household..... 13. \$72,290.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

- 14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.
- 14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

Justin Everett Echols, Debtor 1

Date 3/26/2017

MM / DD / YYYY

X

Jasmine Pauline Echols, Debtor 2

Date 3/26/2017

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION**

IN RE: Justin Everett Echols
Jasmine Pauline Echols

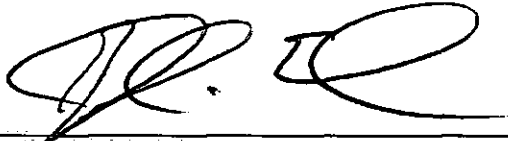
CASE NO

CHAPTER 7

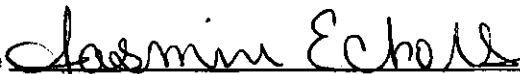
VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 3/26/2017

Signature 
Justin Everett Echols

Date 3/26/2017

Signature 
Jasmine Pauline Echols

AARGON AGENCY
8668 SPRING MOUNTAIN RD
LAS VEGAS NV 89117

ALLIANCEONE
1684 WOODLANDS DR
SUITE 150
MAUMEE OH 43537

AVANTE USA
3600 S GESSNER RD
SUITE 225
HOUSTON TX 77063

BADCOCK
PO BOX 497
MULBERRY FL 33860

BANFIELD PET HOSPITAL
18101 SE 6TH WAY
VANCOUVER WA 98683

BANK OF AMERICA
PO BOX 25118
TAMPA FL 33633

BARCLAY BANK
125 S WEST ST
WILMINGTON DE 19801

BB&T
PO BOX 632
WHITEVILLE NC 28472

BEST BANK
PO BOX 240200
MILWAUKEE WI 53224

BIOREFERENCE LABORATORIES
PO BOX 21134
NEW YORK NY 10087

BOULDER CREDIT SERVICES
PO BOX 1259
TROY MI 48099

BUSINESS REVENUE SYSTEMS
PO BOX 13077
DES MOINES IA 50310

CAPITAL ONE
PO BOX 30285
SALT LAKE CITY UT 84130

CBCS
PO BOX 2589
COLUMBUS OH 43216

CHARLES M LANGEVIN JR
511 TROUSSEAU LN
MCDONOUGH GA 30252

CHASE
PO BOX 36520
LOUISVILLE KY 40233

CHILDREN'S HEALTHCARE OF ATLANTA
PO BOX 3475
TOLEDO OH 43607

COMCAST
1701 JFK BOULEVARD
PHILADELPHIA PA 19103

CONTRACT CALLERS INC
501 GREEN ST 3RD FLOOR
AUGUSTA GA 30901

DARNEL QUICK RECOVERY
4134 US 278
COVINGTON GA 30014

DIRECTV
PO BOX 6550
ENGLEWOOD CO 80155

DIVERSIFIED ACCOUNT SYSTEMS
PO BOX 870547
MORROW GA 30287

EASTERN ACCOUNT SYSTEMS
PO BOX 1022
WIXOM MI 48393

EMORY ALLIANCE CREDIT UNION
1237 CLAIRMONT ROAD
DECATUR GA 30030

EMORY HEALTHCARE
1364 CLIFTON RD NE
ATLANTA GA 30322

EOS CCA
700 LONGWATER DR
NORWELL MA 02061

EXETER FINANCE
222 LAS COLINAS BLVD W STE 1800
IRVING TX 75039

FIRST FINANCIAL ASSET MANAGEMENT
3091 GOVERNORS LAKE PKWY #500
NORCROSS GA 30071

FIRST FINANCIAL BANK USA
363 W ANCHOR DR
NORTH SIOUX CITY SD 57049

FIRST NATIONAL COLLECTION BUREAU
610 WALTHAM WAY
SPARKS NV 89434

FRANKLIN COLLECTION SERVICE
2978 W JACKSON ST
TUPELO MS 38801

GEORGIA DEPARTMENT OF REVENUE
1800 CENTURY BLVD NE SUITE 9100
ATLANTA GA 30345

GEORGIA POWER
241 RALPH MCGILL BLVD
ATLANTA GA 30308

GM FINANCIAL
PO BOX 181145
ARLINGTON TX 76096

HARRIS & HARRIS
111 W JACKSON BLVD
SUITE 400
CHICAGO IL 60604

HUNTER WARFIELD
4620 WOODLAND CORPORATE BLVD
TAMPA FL 33614

IC SYSTEMS
PO BOX 64378
SAINT PAUL MN 55164

LAUREN MOORE
3241 QUINCEY CROSSING
CONYERS GA 30013

MONEY TREE
561 FOREST PKWY #6
FOREST PARK GA 30297

NATIONAL CREDIT SYSTEMS
PO BOX 312125
ATLANTA GA 31131

NELNET
121 S 13TH ST
LINCOLN NE 68508

NORTH AMERICAN CREDIT SERVICES
2810 WALKER RD
CHATTANOOGA TN 37421

NORTHSIDE ANESTHESIOLOGY CONSULTANTS
1000 JOHNSON FERRY RD NE
ATLANTA GA 30342

NORTHSIDE HOSPITAL
1000 JOHNSON FERRY RD
ATLANTA GA 30342

PATHOLOGY & LABORATORY MEDICINE PC
3300 BUCKEYE RD
ATLANTA GA 30341

PATIENT ACCOUNTS BUREAU
PO BOX 279
NORCROSS GA 30091

PEACHTREE PIEDMONT PATHOLOGY
1968 PEACHTREE RD
ATLANTA GA 30309

PEDIATRIX MEDICAL GROUP
1301 CONCORD TERRACE
FORT LAUDERDALE FL 33323

PIEDMONT HEALTHCARE
PO BOX 102859
ATLANTA GA 30368

PORTFOLIO RECOVERY
120 CORPORATE BLVD
PENSACOLA FL 32502

PROGENITY
PO BOX 3951
SARASOTA FL 34230

PROGRESSIVE FINANCIAL
1919 W FAIRMONT DR #8
TEMPE AZ 85282

QVC
1200 WILSON DR
WEST CHESTER PA 19380

ROCKDALE COUNTY ER PHYSICIANS
1412 MILSTEAD AVE
CONYERS GA 30012

ROCKDALE COUNTY WATER
958 MILSTEAD AVE
CONYERS GA 30012

ROCKDALE MEDICAL CENTER
1412 MILSTEAD AVE
CONYERS GA 30012

SCA COLLECTIONS
PO BOX 876
GREENVILLE NC 27835

SCANA
3344 PEACHTREE RD NE #2150
ATLANTA GA 30326

SERVICE LOAN
2166 SALEM RD SE #A
CONYERS GA 30013

SHERMAN ORIGINATORS III LLC
PO BOX 10497
GREENVILLE SC 29603

SIX FLAGS
924 AVENUE J
GRAND PRAIRIE TX 75050

SNAPPING SHOALS EMC
14750 BROWN BRIDGE RD
COVINGTON GA 30016

SOLSTAS LAB PARTNERS
4380 FEDERAL DR
SUITE 100
GREENSBORO NC 27410

SUNTRUST BANK
303 PEACHTREE ST
ATLANTA GA 30308

TERRACES AT FIELDSTONE APARTMENTS
50 LOCH HAVEN DR SE
CONYERS GA 30013

US DEPARTMENT OF EDUCATION
PO BOX 105028
ATLANTA GA 30348

WELLS FARGO
420 MONTGOMERY STREET
SAN FRANCISCO CA 94104

WILKINSON REA
2100 RIVEREDGE PKWY
SUITE 825
ATLANTA GA 30328

WOODLAND TRACE APARTMENTS
1669 IRIS DRIVE SE
CONYERS GA 30013

U. S. BANKRUPTCY COURT / NORTHERN DISTRICT OF GEORGIA / ATLANTA DIVISION

RECEIPT #01238131 (OJ) OF 03/27/2017

ITEM	CODE	CASE	QUANTITY	AMOUNT	BY
1	7IN	17-55541	1	\$ 75.00	Currency
		Judge - unknown at time of receipt			
		Debtor - JUSTIN EVERETT ECHOLS			

TOTAL: \$ 75.00

Amount Tendered: \$ \$ 80.00

Change Returned: \$ \$ 5.00

FROM: Justin Everett Echols
3241 Quincey Crossing
Conyers, GA 30013

Please submit the following original documents to the Court for filing so that the case will proceed timely. If you would like to have a filed-stamped copy of the documents, please submit an extra copy along with a self-addressed stamped envelope.

☒ Individual - Series 100 Forms

☐ Non-Individual - Series 200 Forms

MISSING DOCUMENTS DUE WITHIN 7 DAYS

- ☐ Complete List of Creditors (names and addresses of all creditors)
- ☐ Pro Se Affidavit (due within 7 days, signature must be notarized, or witnessed by a Court Intake Clerk, accompanied by a picture I.D.)
- ☐ Signed Statement of SSN (due within 7 days)

MISSING DOCUMENTS DUE WITHIN 14 DAYS

- ☐ Statement of Financial Affairs
- ☐ Schedules: A/B C D E/ F G H I J ☐ J-2 (different address for Debtor 2)
- ☐ Summary of Assets and Liabilities
- ☐ Declaration About Debtor(s) Schedules
- ☐ Attorney Disclosure of Compensation
- ☐ Petition Preparer's Notice, Declaration and Signature (Form 119)
- ☐ Disclosure of Compensation of Petition Preparer (Form 2800)
- ☐ Chapter 13 Current Monthly Income
- ☐ Chapter 7 Current Monthly Income
- ☐ Chapter 11 Current Monthly Income
- ☐ Certificate of Credit Counseling (Individuals only)
- ☐ Pay Advices (Individuals only) (2 Months)
- ☐ Chapter 13 Plan, complete with signatures (local form)
- ☐ Corporate Resolution (Business Ch. 7 & 11)

Ch.11 Business

- ☐ 20 Largest Unsecured Creditors
- ☐ List of Equity Security Holders
- ☐ Small Business - Balance Sheet
- ☐ Small Business - Statement of Operations
- ☐ Small Business - Cash Flow Statement
- ☐ Small Business - Federal Tax Returns

MISSING DOCUMENTS DUE WITHIN 30 DAYS

- ☐ Statement of Intent - Ch. 7 (Individuals only)

Petition Deficiencies:

- ☐ Last 4 digits of SSN
- ☐ Address ☐ County
- ☐ Type of Debtor
- ☐ Chapter
- ☐ Nature of Debts
- ☐ Statistical Estimates
- ☐ Venue
- ☐ Attorney Bar Number

Case filed via:

- ☒ Intake Counter by:
 - ☐ Attorney
 - ☒ Debtor 2 - verified ID
 - ☐ Other - copy of ID: (678) 879-7418
- ☐ Mailed by:
 - ☐ Attorney
 - ☐ Debtor
 - ☐ Other: _____

History of Case Association

Prior cases within 2 years: None.

Signature: 
Acknowledgment of receipt of check list

Official and Local Bankruptcy Forms are available on the Court's website at: www.ganb.uscourts.gov. If filing bankruptcy without an attorney, please read the information regarding *Filing Bankruptcy without an Attorney* at: www.uscourts.gov/services-forms/bankruptcy/filing-without-attorney.

FILING FEE INFORMATION - if the required filing fees are not paid in full at the time of case filing, an Order will be forthcoming:

- ☒ Paid \$ 75.00 ☒ 2g-Order Granting ☐ 3g-Order Granting 7 days (\$75 due within 7 days)
- ☐ 2d-Order Denying with filing fee of \$ _____ due within 7 days ☐ IFP filed (Ch.7 Individuals Only)
- ☐ No Application to Pay in Installments, Order Regarding Unpaid Case Filing Fee.

You may mail documents and filing fee payments (no personal checks accepted - cashier's check or money orders only) to the address below.
All fee payments and documents filed with the Court must show the debtor's name and bankruptcy case number.

****Failure to Comply may result in the dismissal of your case.****

UNITED STATES BANKRUPTCY COURT
75 Ted Turner Drive, SW, Room 1340
Atlanta, Georgia 30303
404-215-1000

Intake Clerk: O. Jones, III

Date: 3/27/17

Case Opener:

Date: